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Bib Data Sheet

CONFIRMATION NO. 9471

SERIAL NUMBER 10/712,245	FILING DATE 11/12/2003 RULE	CLASS 455	GROUP ART UNIT 2685	ATTORNEY DOCKET NO. JCLA12023
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APPLICANTS

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** CONTINUING DATA ***** None *DN*

** FOREIGN APPLICATIONS ***** None *DN*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 02/06/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TAIWAN	SHEETS DRAWING 2	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after . Allowance	EXAMINER'S SIGNATURE <i>[Signature]</i>			
Verified and Acknowledged	INITIALS <i>[Initials]</i>			

ADDRESS
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TITLE
 Mobile phone device with video output

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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